Service Description	Outpatient	Parole Aftercare	Intensive Outpatient	IYTP	Halfway Housing	Detox	Residential	Pre- Treatment	GAIN-I Assessment	Medicaid	Private Pay	Follow Up	Recovery Support Services
(90785) Interactive Complexity										Х	Х		
(90791) Psychiatric Diagnostic Evaluation										Х	Х		
(90792) Psychiatric Diagnostic Evaluation with Medical Service	ces									Х	Х		
(90792/GT) Telehealth Psychiatric Diagnostic Evaluation with	n Medical Serv	vices								Х	Х		
(90832) Psychotherapy, 30 minutes										Х	Х		
(90832/GT) Telehealth Psychotherapy, 30 minutes										Х	Х		
(90833) Psychotherapy, 30 minutes with evaluation and mar	nagement serv	vice								Х	Х		
(90833/GT) Telehealth Psychotherapy, 30 minutes with evaluation	uation and ma	nagement se	ervice							Х	Х		
(90834) Psychotherapy, 45 minutes										Х	Х		
(90836) Psychotherapy, 45 minutes with evaluation and mar	nagement serv	/ice								Х	Х		
(90837) Psychotherapy, 60 minutes with patient and/or fami	ily member									Х	Х		
(90846) Family Psychotherapy, without patient										Х	X		
(90847) Family Psychotherapy, with patient present										Х	Х		
(90853) Group Psychotherapy										Х	Х		
(H0001) Individual Assessment - Substance Abuse										Х	Х		
(H0003) Drug/Alcohol Testing										X	X		
(H0004) Individual Counseling - Substance Abuse										X	X		
(H0004/76) Individual Counseling - Second Service, Same Da	\ V									X	X		
(H0005) Group Counseling - Substance Abuse	y									X	X		
(H0005/76) Group Counseling - Second Service, Same Day										X	X		
(H0006) Case Management - Substance Abuse										X	X		
(H0006/76) Case Management - Second Service, Same Day										X	X		
(H0023) Telephonic Case Management										X	X		
(H0031) BH Service Coordination Plan Assessment and Devel	onmont									X	X		
(H0032) Individualized Treatment Plan	Г									X	X		
(H0038) Peer Support by certified Peer Support Specialist										X	X		
(H0046) Family Support by Family Support Specialist										X	X		
(H2011) Community Crisis Intervention										X	X		
(H2014) Skills Training and Development										X	X		
(H2015) Community Transition Support Services										Х	X		
(H2017/76) Community Based Rehab Services										Х	X		
(T1013) Sign Language or Oral Interpretation Services										Х	X		
(T1017) Case Management - Behavioral Health										Х	X		
Adolescent Residential							Х				Х		
Adolescent Safe & Sober Housing	Х		X		X	Х					X		Х
Adolescent Transitional Housing	Х		Х						Х		X		Х
Adult Detox						Х					Χ		
Adult Halfway House					Х						X		
Adult Residential							Х				X		
Adult Safe & Sober Housing	Х	Х	Х					Х	Х		X		Х
Adult Transitional Housing	Х	Х	Х		Х						Χ		Х
Alcohol or Drug Assessment								X	Х		X		
Case Management (Basic and Intensive)	Х	Х	Х		X	Х		Χ	Х		Χ		Х

Case Management (PWWC)	Х	Х	Х		Х	Х		Х	Х		Х		Х
Child Care	Х	Х	Х		Х	Х		Х	Х		Х		Х
Common Assessment	Х	Х							х		Х		
Drug/Alcohol Testing	Х	Х	Х		Х	Х		х	Х		Х		Х
Education (Medicaid Supplemental)	Х	Х	Х					Х			Х		
Extended Therapy Session										Х			
Follow Up												Х	
Follow Up 30-Day Interview Completed												Х	
Follow Up 30-Day Attempts Unsucessful												Х	
Follow Up 6-Month Interview Completed												Х	
Follow Up 6-Month Attempts Unsuccessful												Х	
Follow Up 12-Month Interview Completed												Х	
Follow Up 12-Month Attempts Unsuccessful												Х	
Intensive Outpatient			Х								Х		
Intensive Outpatient (Education)			Х								Х		
Intensive Outpatient (family without client present)			Х								Х		
Intensive Outpatient (Individual with Family Members)			Х								Х		
Intensive Outpatient (Individual)			Х								Х		
Interpreter Services	Х	Х	Х		Х	Х	Х	Х	Х		Х		Х
IYTP 3 Month Follow-up Interview				Х									
IYTP 6 Month Follow-up Interview				Х									
YTP Case Management				Х									
IYTP Child Care				Х									
YTP Client/Family Contact Preparation				Х									
IYTP Drug Testing				Х									
IYTP Family Sessions (with client present)				Х									
IYTP Family Sessions (without client present)				Х									
IYTP GAIN-I Assessment				Х									
IYTP GAIN-M90 Assessment				Х									
IYTP GPRA Discharge Interview				Х									
IYTP GPRA Intake Interview				Х									
IYTP GPRA Interview				Х									
IYTP Group Session				Х									
IYTP Individual Session				Х									
IYTP Ineligible Services				Х									
IYTP Screening by Clinician				Х									
IYTP Screening by Support Staff				Х									
IYTP Transportation				Х									
YTP Transportation of Client				Х									
IYTP Transportation Pick Up				Х									
YTP Treatment Program Services				Х									
Life Skills	Х	Х	Х		Х	Х		Х	Х		Х		Х
Life Skills (Group)	Х	Х	х		Х	Х		Х	Х		Х		Х
Life Skills (Individual)	Х	Х	Х		Х	Х		Х	Х		Х		Х
Life Skills (Medicaid Supplemental)	Х	Х	Х		Х	Х		Х	Х		Х		Х
Life Skills Group (Medicaid Supplemental)	х	Х	Х		Х	Х		х	Х		Х		Х

Life Skills Group w/o client (Medicaid Supplemental)	Х	Х	Х	Х	Х		Х	Х	Х	Х
Life Skills Individual w/o client (Medicaid Supplemental)	Х	Х	Х	Х	Х		Х	Х	Х	Х
Life Skills-Client not present (Group)	Х	Х	Х	Х	Х		Х	Х	Х	Х
Life Skills-Client not present (Individual)	Х	Х	Х	Х	Х		Х	Х	Х	Х
Lodging	Х	Х	Х					Х	Х	Х
Medical Needs Benefit	Х	Х	Х	Х	Х	Х		Χ	Х	Х
OP and IOP (Group)	Х	Х	Х				Х		Х	
Outpatient	Х	Х					Х		Х	
Outpatient (Education)	Х	Х					Х		Х	
Outpatient (family without client present)	Х	Х					Х		Х	
Outpatient (Individual with Family Members)	Х	Х					Х		Х	
Outpatient (Individual)	Х	Х					Х		Х	
Parolee Aftercare	Х	Х							Х	
Pre-Treatment Services							Х		Х	
Pre-Treatment Services (Education)							Х		Х	
Pre-Treatment Services (Individual)							Х		Х	
Recovery Coach			Х				Х		Х	Х
Staffing (Planned Facilitation)	Х	Х	Х	Х	Х	Х	Х		Х	X
Transportation	Х	Х	Х	Х	Х	Х	Х	Χ	Х	Х
Transportation Flat Fee	Х	Х	Х	Х	Х	Х	Х	Х	Х	Х
Transportation of Child	Х	Х	Х	Х	Х	Х	Х	Х	Х	Х
Transportation of Child Per Mile	Х	Х	Х	Х	Х	Х	Х	Х	Х	X
Transportation of Child Pick Up	Х	Х	Х	Х	Х	Х	Х	Χ	Х	Х
Transportation of Client	Х	Х	Х	Х	Х	Х	Х	Х	Х	X
Transportation pick up	Х	Х	Х	Х	Х	Х	Х	Х	Х	Х
Travel for Professionals (1 unit = 1 Mile)	Х		Х				Х	Х	Х	Х
Update Assessment				 				Х		